

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): William R. Rassman; Jae Pak
Assignee: William R. Rassman
Title: Method and Apparatus For Transplanting a Hair Graft
Serial No.: 10/752,263 Filing Date: January 5, 2004
Examiner: Victor X. Nguyen Group Art Unit: 3731
Docket No.: M-15239-1P US Confirmation No.: 4042

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CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following Transmittal Letter (1 page), Petition for a Two-Month Extension of Time (1 Page), and Response to Non-Final Office Action (8 pages) are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Dated: October 27, 2006


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 Serial No.: 10/752,263 Filed: January 5, 2004
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Dear Sir:

Transmitted herewith are the following documents in the above-identified application:

- (1) Facsimile Cover Sheet;
- (2) This Transmittal Letter; (1 page)
- (3) Petition for a Two-Month Extension of Time (1 page)
- (4) Response to Non-Final Office Action (8 pages)



No additional fee is required.



The fee has been calculated as shown below:

CLAIMS AS AMENDED

	<u>Claims Remaining After Amendment</u>		<u>Highest No. Previously Paid For</u>		<u>Present Extra</u>	<u>Rate</u>	<u>Additional Fee</u>	
Total Claims	23	Minus	29	=	0	X \$25.00	\$	0
Independent Claims	2	Minus	5	=	0	X \$100.00	\$	0
<input type="checkbox"/>	Fee of _____ for the first filing of one or more multiple dependent claims per application						\$	
Total additional fee for this Amendment:							\$	0
<input checked="" type="checkbox"/>	Conditional Petition for Extension of Time: If an extension of time is required for timely filing of the enclosed document(s) after all papers filed with this transmittal have been considered, an extension of time is hereby requested.							
<input checked="" type="checkbox"/>	Petition for a Two-Month Extension of Time in the amount of						\$	<u>225</u>
<input checked="" type="checkbox"/>	Please charge our Deposit Account No. 50-2257 in the amount of							<u>225</u>
<input checked="" type="checkbox"/>	Also, charge any additional fees required and credit any overpayment to our Deposit Account No. 50-2257							
Total:							\$	225

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I hereby certify that this correspondence is facsimile transmitted to the Commissioner for Patents, Alexandria, VA 22313-1450, at 571-273-8300 on the date shown below.

[Signature]
Tina Kavanaugh

October 27, 2006

Respectfully submitted,

[Signature]

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